

FEC
FORM 1

STATEMENT OF
ORGANIZATION

RECEIVED
SECRETARY OF THE SENATE
PUBLIC RECORDS
2017 OCT 17 AM 10:15

Office Use Only

1. NAME OF
COMMITTEE (in full)

☐ (Check if name is
changed)

Example: If typing, type
over the lines.

12FE4M5

Bob Casey for Senate Inc

ADDRESS (number and street) PO BOX 58746

☐ (Check if address is
changed)

Philadelphia
CITY

PA
STATE

19102
ZIP CODE

COMMITTEE'S E-MAIL ADDRESS (Please provide only one e-mail address)

☒ (Check if address is
changed)

Aubrey@thecampaigncompliancefirm.com; joleary@bobcasey.com

COMMITTEE'S WEB PAGE ADDRESS (URL)

☐ (Check if address is
changed)

www.BobCasey.com

2. DATE

09/30/2017

3. FEC IDENTIFICATION NUMBER

C000431056

4. IS THIS STATEMENT

☐ NEW (N)

OR

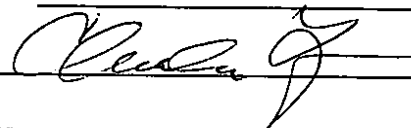
☒ AMENDED (A)

I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Lyons, Charles, , ,

Signature of Treasurer



Date 10/12/17

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C 437g.
ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS.

Office
Use
Only

For further information contact:
Federal Election Commission
Toll-free 800-424-9530
Local 202-694-1100

FEC FORM 1
(Revised 06/2012)

201710180200331073

5. TYPE OF COMMITTEE

Candidate Committee:

- (a) ☒ This committee is a principal campaign committee. (Complete the candidate information below.)
- (b) ☐ This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.)

Name of Candidate Casey, Robert, P., , Jr.

Candidate Party Affiliation DEM Office Sought ☐ House ☒ Senate ☐ President State PA District

- (c) ☐ This committee supports/opposes only one candidate, and is NOT an authorized committee.

Name of Candidate _____

Party Committee:

- (d) ☐ This committee is a _____ (National, State or subordinate) committee of the _____ (Democratic, Republican, etc.) Party.

Political Action Committee (PAC):

- (e) ☐ This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization is a:

☐ Corporation ☐ Corporation w/o Capital Stock ☐ Labor Organization
☐ Membership Organization ☐ Trade Association ☐ Cooperative

☐ In addition, this committee is a Lobbyist/Registrant PAC.

- (f) ☐ This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or party committee. (i.e. nonconnected committee)

☐ In addition, this committee is a Lobbyist/Registrant PAC.

☐ In addition, this committee is a Leadership PAC. Identify sponsor on line 6.)

Joint Fundraising Representative:

- (g) ☐ This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, at least one of which is an authorized committee of a federal candidate.
- (h) ☐ This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, none of which is an authorized committee of a federal candidate.

Committees Participating in Joint Fundraiser

1. _____	FEC ID Number : c
2. _____	FEC ID Number : c
3. _____	FEC ID Number : c
4. _____	FEC ID Number : c

201710180200331074

Write or Type Committee Name

Bob Casey for Senate Inc

6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor
Keystone Victory Fund

Mailing Address PO BOX 58746

Philadelphia
CITYPA
STATE19102
ZIP CODE

Relationship:

☐ Connected Organization ☐ Affiliated Committee ☒ Joint Fundraising Representative ☐ Leadership PAC Sponsor

7. Custodian of Records: Identify by name, address (phone number -- optional) and position of the person in possession of committee books and records.

Full Name Lyons, Charles, , ,

Mailing Address PO BOX 58746

Philadlephia
CITYPA
STATE19102
ZIP CODE

Title or Position

Treasurer

Telephone Number (215) 880-7224

8. Treasurer: List the name, address (phone number -- optional) of the treasurer of the committee; and the name and address of any designated agent (e.g., assistant treasurer).

Full Name Lyons, Charles, , ,

Mailing Address PO BOX 58746

Philadelphia
CITYPA
STATE19102
ZIP CODE

Title or Position

Treasurer

Telephone Number (215) 880-7224

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Full Name of Designated Agent Montgomery, Aubrey, , ,

Mailing Address 30 South 15th Street, 15th Floor

Philadelphia

CITY

PA

STATE

19102

ZIP CODE

Title or Position

Compliance Director

Telephone Number (215) 995-3189

9. Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds.

Name of Bank, Depository, etc.

PNC Bank

Mailing Address 1600 Market Street

Philadelphia

CITY

PA

STATE

19102

ZIP CODE

Name of Bank, Depository, etc.

Amalgamated Bank

Mailing Address 1825 K St NW

Washington

CITY

DC

STATE

20006

ZIP CODE

201710180200331078

[ADDITIONAL]

Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor

Ohio Pennsylvania Victory Fund

Mailing Address 918 Pennsylvania Ave SE

Washington

CITY

DC

STATE

20003

ZIP CODE

Relationship:

☐

Connected Organization

☐

Affiliated Committee

☒

Joint Fundraising Representative

☐

Leadership PAC Sponsor

[ADDITIONAL]

Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor

Rhode Island Pennsylvania Victory Fund

Mailing Address 918 Pennsylvania Ave SE

Washington

CITY

DC

STATE

20003

ZIP CODE

Relationship:

☐

Connected Organization

☐

Affiliated Committee

☒

Joint Fundraising Representative

☐

Leadership PAC Sponsor

[ADDITIONAL]

Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor

Blue Senate 2018

Mailing Address 918 Pennsylvania Ave SE

Washington

CITY

DC

STATE

20003

ZIP CODE

Relationship:

☐

Connected Organization

☐

Affiliated Committee

☒

Joint Fundraising Representative

☐

Leadership PAC Sponsor

[ADDITIONAL]

Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor

Justice 2018

Mailing Address 918 Pennsylvania Ave, SE

Washington

CITY

DC

STATE

20003

ZIP CODE

Relationship:

201710180200331077

☐ Connected Organization ☐ Affiliated Committee ☒ Joint Fundraising Representative ☐ Leadership PAC Sponsor

[ADDITIONAL]

Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor

Green Senate IMPACT 2018

Mailing Address 918 Pennsylvania Ave SE

Washington

CITY

DC

STATE

20003

ZIP CODE

Relationship:

☐ Connected Organization ☐ Affiliated Committee ☒ Joint Fundraising Representative ☐ Leadership PAC Sponsor

[ADDITIONAL]

Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor

Common Sense 2018

Mailing Address 918 PENNSYLVANIA AVE SE

Washington

CITY

DC

STATE

20003

ZIP CODE

Relationship:

☐ Connected Organization ☐ Affiliated Committee ☒ Joint Fundraising Representative ☐ Leadership PAC Sponsor

[ADDITIONAL]

Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor

MN OH PA Victory Fund

Mailing Address 918 Pennsylvania Ave

Washington

CITY

DC

STATE

20003

ZIP CODE

Relationship:

☐ Connected Organization ☐ Affiliated Committee ☒ Joint Fundraising Representative ☐ Leadership PAC Sponsor

201710180200331078

United States Senate

OFFICE OF THE SECRETARY

OFFICE OF PUBLIC RECORDS

THE PRECEDING DOCUMENT WAS:

HAND DELIVERED _____
Date of Receipt

USPS FIRST CLASS MAIL _____
Date of Receipt Postmark

USPS REGISTERED/CERTIFIED 10/13/17
Postmark

USPS PRIORITY MAIL _____
Postmark

DELIVERY CONFIRMATION OR SIGNATURE CONFIRMATION LABEL ☐

USPS EXPRESS MAIL _____
Postmark

OVERNIGHT DELIVERY SERVICE:

	SHIPPING DATE	NEXT BUSINESS DAY DELIVERY
FEDERAL EXPRESS	_____	<input type="checkbox"/>
UPS	_____	<input type="checkbox"/>
DHL	_____	<input type="checkbox"/>
AIRBORNE EXPRESS	_____	<input type="checkbox"/>

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Date of Receipt

POSTMARK ILLEGIBLE ☐ NO POSTMARK ☐

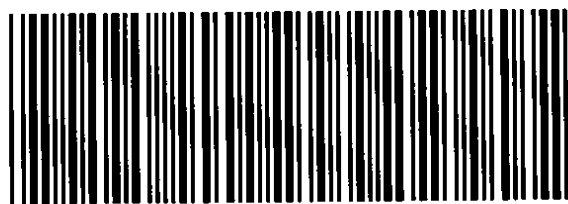
FAX _____
Date of Receipt

OTHER _____
Date of Receipt or Postmark

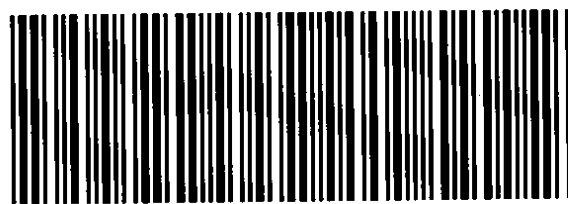
PREPARER DH DATE PREPARED 10-17-17

4/04/16

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SEN PATCH



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